

STATE OF TENNESSEE
BOARD OF ARCHITECTURAL AND ENGINEERING EXAMINERS
DEPARTMENT OF COMMERCE AND INSURANCE
500 James Robertson Parkway, Third Floor, Nashville, TN 37243-1142

800-256-5758 615-741-3221 (Nashville Area) 615-532-9410 (FAX)

Principles and Practice of Engineering Exam Information

(for initial registration as a Professional Engineer)

Exam Dates and Application Deadlines

Exam Dates	Application Deadline— New Applicants (Application and Fees due in Board Office)	Application Completion Deadline— Supporting Documentation for New Applicants (Transcripts, References, FE Exam Verification, etc.) (To facilitate Engineering Committee Review)
October 29, 2004	July 1, 2004	August 1, 2004
April 15, 2005	December 1, 2004	January 1, 2005
October 28, 2005	May 15, 2005	June 15, 2005
April 21, 2006	December 1, 2005	January 1, 2006
October 27, 2006	May 15, 2006	June 15, 2006
April 20, 2007	December 1, 2006	January 1, 2007
October 26, 2007	May 15, 2007	June 15, 2007
April 11, 2008	December 1, 2007	January 1, 2008
October 24, 2008	May 15, 2008	June 15, 2008
April 24, 2009	December 1, 2008	January 1, 2009
October 23, 2009	May 15, 2009	June 15, 2009
April 16, 2010	December 1, 2009	January 1, 2010
October 29, 2010	May 15, 2010	June 15, 2010
April 8, 2011	December 1, 2010	January 1, 2011
October 28, 2011	May 15, 2011	June 15, 2011

Exams given in April and October

Chemical
Civil
Electrical and Computer
Environmental

Mechanical Structural I Structural II

April Exams Only

Architectural Engineering
Naval Architecture/Marine Engineering

October Exams Only

Agricultural
Control Systems
Fire Protection
Industrial
Metallurgical
Mining/Mineral
Nuclear
Petroleum

Exam Locations

Exams are currently given in Knoxville, Memphis, and the Nashville area; however, this is subject to change.

Residency Requirements

An applicant for registration by exam must meet Tennessee's residency requirement (Rule 0120-1-.03).

Forms

(1) Application Form –

- Fill out the application form completely (on-line or after downloading it), sign it, and have it notarized. Any major modification of state approved forms may cause the Board to reject your application.
- Provide detailed information regarding your progressive engineering design work and responsibility on projects, to enable evaluation of experience. For a description of progressive engineering experience <u>click here</u>. All time/experience must be accounted for whether it is related to engineering or not. You must show the minimum required years of experience at the time of application.

For the Board's policy concerning exam choices click here.

(2) Reference Forms –

- Submit five (5) references from persons acquainted with your technical ability and character.
 - o Three of the five references must be from registered engineers and

- o References are required from both a current employer/supervisor and a past employer/supervisor (if applicable). No more than three (3) references can be from your current employment.
- References from relatives are not acceptable.
- You are responsible for sending reference forms to the persons listed on your application who will then submit them directly to the Board office.

(3) Request-For-Transcript Form -

Submit the Registrar's Letter to each post-high school institution attended. Your transcript(s) must be submitted directly to the Board office from each institution attended.

Fees

Make checks payable to the **Tennessee Department of Commerce and Insurance**.

You should submit both the application fee and the exam-scoring fee with your application. These fees are listed below under "Fee Information."

Fee Information:

Application Fee – \$30 (nonrefundable)

Exam Scoring Fee – \$130

Postponement Fee – \$25 (due after exams are ordered)

Biennial Registration Fee – \$140 (due after exam is passed)

Retake Fee – \$205

Applicants With Foreign Degrees

If you have a foreign undergraduate degree in engineering, you must have your academic record evaluated by the Engineering Credentials Evaluation International (ECEI) of the Accreditation Board for Engineering and Technology (ABET) before submitting this application to determine if your degree is substantially equivalent to an engineering degree accredited by the ABET. You may contact ECEI at 211 E. Lombard St., Suite 357, Baltimore, MD, 21202, phone: 410-347-7738, or you can download an application from their website at ecei.org.

Verification

The Board will request verification from the state board where you passed the Fundamentals of Engineering examination. If the state board charges a fee to provide verification, a form will be sent to you to submit to the appropriate state board with your fee.

Disability Accommodations

If you have a disability that may require special accommodations to take this exam, submit the <u>Request for Accommodation</u> form with your application. If accommodation is not requested in advance and documentation is not submitted with the accommodation request/application, we cannot guarantee the availability of accommodation on short notice or on site.

Pending Status

An application that lacks required information or reflects a failure to meet any requirement will be held in a "pending" status for five (5) years from the date of the application. The Board considers passing the respective registration examination as one of the requirements for a completed application.

Scheduling Information

The Board has contracted with NCEES, effective with the October 2003 exam administration, for exam administration services, including the scheduling of candidates. NCEES will distribute test admission notices to approved candidates within 3-4 weeks before the exam. For further information, visit the NCEES website.

Exam Preparation Information

For information about exam preparation resources, visit the NCEES website.

Exam Materials and Calculator Information

For information regarding materials permitted and not permitted in the examination room, including acceptable calculators, visit the NCEES website.

Score Reporting

Scores are received approximately 90 days after the date of the exam. You will be notified, in writing, within 10 days from the day scores are received. Scores are not released over the phone nor posted on the web site.

Board Contact

Contact Wanda Phillips at 615-741-3221, 800-256-5758, or send e-mail to <u>wanda.phillips@state.tn.us</u> if you need further information or have questions about this information.

Note: You may want to print this page out for further reference.



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500 JAMES ROBERTSON PARKWAY, THIRD FLOOR
NASHVILLE, TENNESSEE 37243-1142

APPLICATION FOR REGISTRATION TO PRACTICE AS A PROFESSIONAL ENGINEER

Social Security No.

Type or print legibly

Full Name ____

Residence Address				City			
State/Zip				County			
Residence Phone No							
Business Affiliation							
Business Address				City			
State/Zip				Official Capacity			
Business Phone No.				Fax Number			
E-mail Address Address for Correspondence:							
Date of Birth				City/State			
Citizen of (State/Foreign Country)				Can you speak and write English	h?	Yes	No
I am applying for registration by:Examination and wish to be examin	ned in th	ne disciplin	e of	engin	eering to	be admini	stered
date	at			exam location			
Do you have a disability that may require	-			taking an examination? CEES Council Record (optional).		_Yes _	No
ComityReapplying (For				not write below this line.)			
Board Review – Examination		*		Board Review – Registration			
Board Member	Date	Aprvd	Dis- Aprvd	Board Member	Date	Aprvd	Dis- aprvd
IN-0168 (Rev. 1/01)						RD	A 2228

First

Middle

Date of Application

Full Name				
All information MUST comply with instruction	ns or the application	on will be returne	d.	
If you have ever changed your name through ma	arriage, a court acti	on, or have ever b	een known by a	ny other name,
please list name(s) and date(s) of change.				
Have you passed the Fundamentals of Engineerin	ng (EIT) examinatio	n?	YesNo	
If so, name state/territory and year				
Have you passed a written professional examination	ion?		YesNo	
If so, name state/territory and year				
In what states are you registered?	(please give license	e or registration number	r for each)	
If you have ever been registered in any states other	er than those named	above, please list	them	
List membership in technical or professional orga	anizations			
Have you ever been denied registration or lasurrendered as a result of disciplinary proceeding	s?	•	YesNo	Ž
If so, name state and year				
Have you ever been convicted of a felony?			YesNo	
If so, name place and year				
EDUCATIONAL BACKGROUND Name and Address of Institution	Attendance (From - To)	Date of Graduation	Major Course	Degree Received

Total Time Employment	Title of Position, Name of Employer, Location, and Nature of Each Engagement and Degree of Responsibility	Name, Title, and Address Of Supervisor
Years	Swen Brigagement and Begree of Responsionary	or supervisor
Months		
Years		
Months		
Years		
Months		
Years		
Months		
Years		
Months		
	Years	Employment Years Months Years Years Months Years Years Years Years Years Years Years Years Years

EXPERIENCE

Total Time Employment	Title of Position, Name of Employer, Location, and Nature of Each Engagement and Degree of Responsibility	Name, Title, and Address Of Supervisor
Years	Swen Brigagement and Begree of Responsionary	or supervisor
Months		
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EXPERIENCE

Total Time Employment	Title of Position, Name of Employer, Location, and Nature of Each Engagement and Degree of Responsibility	Name, Title, and Address Of Supervisor
Years	Swen Brigagement and Begree of Responsionary	or supervisor
Months		
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Years		
Months		
	Years	Employment Years Months Years Years Months Years Years Years Years Years Years Years Years Years

EXPERIENCE

ispre year, susper viser care expess empre ye	r/supervisor (ij uppiid	cable). Kejerences	jrom retativ	ves are not acceptable.
References	State of Registration	Employer Past Employer Client		Complete Mailing Address
PPLICATION AND LAW AND RULES AF	EIDAVIC			
thereby make application for registration attention is accurate. attest that I have read, reviewed, and are 2, Chapter 2 and the Rules of the State 1 examiners.	n as an engineer and egistered. The info	ormation provided	on this	Attach a photograph taken in the last 12 months HEAD AND SHOULDERS ONLY
	Signature			
ΓATE OF			-	
OUNTY OF				
worn to and subscribed before me this	day of _			
				Notary Public
			_	



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615-741-3221 (NASHVILLE AREA)

NASHVILLE, TN 37243-1142 615-532-9410 (FAX)

REFERENCEThis request letter is to be completed by the applicant

(Name and Address of Reference)	
	Re:
	(Print or Type Name of Applicant)
Dear	
I have made application to the Tennessee Board o architecture	f Architectural and Engineering Examiners for registration to
practice engineering landscape architecture	
_	rse directly to the Board office in the envelope provided.
	Signature of Applicant)

Board Statement to Reference:

This Board is required by law to obtain evidence of the good character and technical ability of applicants for registration as architects, engineers, and landscape architects. Statements by responsible individuals with personal knowledge of the applicant's character and qualifications will be considered as evidence. Additional information may be attached.

The Board would like to emphasize that evidence submitted on this form must not be perfunctory nor made for the mere purpose of aiding the applicant to be registered. The execution of this statement will be accepted by the Board as a deliberate act made with full knowledge of the responsibility to protect the public health, safety and welfare. It should be borne in mind that the applicant is not being considered for membership in an organization but for registration as an architect, engineer, or landscape architect, qualified to practice in Tennessee.

Since the Board cannot process this application until it receives this reference, a prompt reply will expedite our handling of the application.

THE INFORMATION YOU GIVE WILL BE TREATED IN THE STRICTEST CONFIDENCE.

(see reverse)

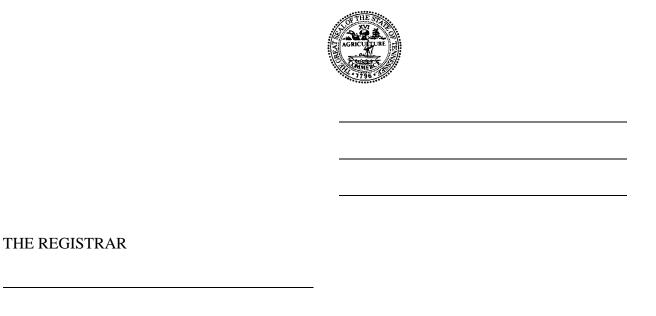
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TO BE COMPLETED BY THE REFERENCE

THIS IS CONFIDENTIAL INFORMATION – FOR USE OF BOARD MEMBERS ONLY

1.	How long have you known to	he applicant? From	to	inclusive
2.	Are you in any way related	to the applicant?	What relationship?	
3.	What has been your connect	ion with the applicant?		
4.		_	Formation pertaining to the duties personsible charge of work and to what	
			general character?	
5.	Please give your estimate of	the applicant as an architect	engineer landscape archi	itect.
7.	To your knowledge, has the	applicant ever been convicted of a	felon?	
8.	Would you employ the appl	icant in a position of trust?		
9.	Is the applicant qualified to	be placed in responsible charge o	f design or supervision of work, wi	th full authority to change
	designs or specifications?			
10.	If the applicant is in individu	ual practice, please indicate the na	cure of the practice	
11.	Do you recommend the appl	icant for registration?		
12.	Remarks concerning the app	licant		
Геі			ferred to is making application for a having carefully read the information	
a.	My full name is	(to be typewritten o	r printed)	
b.	My present employer is	(to be typewritten o	r printed)	
	I am/am not a registered	architect engineer	ate of License I	
	(Date)		(Signature)	
		(Addres	s)	

IN-0682 (Rev. 2/00) RDA 2237



I am applying for regist	tration as a/an				
architect		engineer intern	interior desig	gnerland	dscape architect
The Tennessee Board of			•		
The Tennessee Board of I attended			•	to	
	College or Universit	ty	fromDate	to	Date

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If there is a charge for this service, please forward a statement to me at the above address. Sincerely,

I will appreciate your forwarding a transcript of my record as soon as possible to: